## **Data Transfer Method Identification**

Rev. 1/04

Promoting Responsibility

## Calendar Year 2004

OFFICE OF RECOVERY SERVICES/CHILD SUPPORT SERVICES
Pursuant to Utah Code Annotated 62A-11-304.5 and 62A-11-104.(8)

## **FM02**

Institution Name: Federal Tax/TIN Number:				
Address:				
City/Town:	S	tate:	Zip:	
METHOD 1: (All Accounts M	lethod)			
Institutions/Service Providers may elect identifying all open accounts. Every ins against the ORS/CSS data files. ORS/C of "hits" for those obligors/account hold RECORD for each matched account.	stitution electing this option n CSS will then send a data file ders that matched. The institu	nust submit a file within 30 days ba tion/service agen	each quarter of all account each to the institution or sent must then return a file w	nts to be matched rvice agent with a list within 30 days of "B"
METHOD 2: (Matched Accou	ints Method)			
Institutions/Service Providers may elect ORS' file) against all accounts maintain ORS/CSS on all accounts at the instituti of the Financial Institution Data Matchin	ned at that institution. Institution maintained by obligors/ac	ions electing this	option must report inform	nation required by
MANUAL:				
Those institutions which have 600 or feedata must meet all specifications regarding				
Our institution elects to use:	Method 1	OR	Method 2	OR
QUARTERS:	Manual (Excel form)			
CY2004 is Ja	fusion, please use Calo muary through March ough September; and (	, 2004; Quar	ter 2 is April throug	gh June; Quarte
If you have questions concerning this PO Box 45011 SLC, UT 84145. Fa				01) 536-8902.
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